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Р	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional) HILL 100		
	OIA	In re Application of Rich	nard A. Hillstead, et al			
	The second second	Application Number 0	9/942,236	· ,	Filed August 29, 200	
ME	MN 2 8 2002 E	For Medical Instru	For Medical Instrument			
13	PROFESSION	Group Art Unit 3739	)	Examiner	Not yet Assigned	
	his is a request under the proviseply in the above identified appli	• • •	xtend the period for	filing a		
	he requested extension and app check time period desired):	propriate non-small-entity fee	are as follows			
	One month (37 CFR	1.17(a)(1))			\$	
	X Two months (37 CF)	R 1.17(a)(2))			\$_400.00	
	Three months (37 C	FR 1.17(a)(3))			\$	
	Four months (37 CF	R 1.17(a)(4))			\$	
	Five months (37 CFI	R 1.17(a)(5))			\$	
	The Commissioner has alr application to a Deposit Act The Commissioner is here or credit any overpayment. I have enclosed a duplicate. I am the applicant/inventer assignee of recommissioner has alr applicant.	by authorized to charge any for the count Number to Deposit Account Number to copy of this sheet.  For the entire interest. See it	ees which may be r 50/1039 37 CFR 3.71.	· •		
	X attorney or ager	nder 37 CFR 3.73(b) is enclo at of record.	sed. (Form PTO/SE	3/96).		
	attorney or age	nt under 37 CFR 1.34(a). ımber if acting under 37 CFR 1.34(a	)			
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
	January 28, 2002  Date	4	My W 977 Signat	MANN ure	<u> </u>	
HBER			/ Gary W. Mcl	Farron, Es	sq.	
1	-65.00-QP		Typed	or printe	d name	
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
	Total offorms are	submitted.			·	

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